



## VOLUNTEER APPLICATION

Name \_\_\_\_\_  
Last First Middle Initial

Address \_\_\_\_\_  
Number & street City State Zip code

Phone # \_\_\_\_\_ Birthdate \_\_\_\_\_

Email Address \_\_\_\_\_

Have you ever been convicted of a crime? \_\_\_\_\_ If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

**Experience:** List most recent volunteer experience:

Organization \_\_\_\_\_ Dates of volunteer service: From \_\_\_\_\_ To \_\_\_\_\_

Address \_\_\_\_\_

Positions/Duties \_\_\_\_\_

Telephone \_\_\_\_\_ Supervisor name \_\_\_\_\_

Other volunteer jobs you have had (organization and role): \_\_\_\_\_

\_\_\_\_\_

What is your profession or job title? \_\_\_\_\_

Are you currently employed for pay? \_\_\_\_\_ If so, where do you work? \_\_\_\_\_

What is your availability to volunteer? (hours, days of the week you are available) \_\_\_\_\_

\_\_\_\_\_

What is your reason for seeking to volunteer here? \_\_\_\_\_

\_\_\_\_\_

What special skills, talents, gifts, or personality traits would you bring to this ministry? \_\_\_\_\_

\_\_\_\_\_

Do you consider yourself to be a Christian? \_\_\_\_\_ If yes, how long? \_\_\_\_\_

As a Christian, what is the basis of your salvation? \_\_\_\_\_

What church do you attend? \_\_\_\_\_

What denomination? \_\_\_\_\_ How Long? \_\_\_\_\_

Pastor's Name \_\_\_\_\_ Phone number \_\_\_\_\_

Do we have your permission to call your pastor as a reference? \_\_\_\_\_

If not, please give us another name and phone number of someone who can verify your Christian character and capabilities:

\_\_\_\_\_

Another personal reference who has known you for at least 2 years:

Name \_\_\_\_\_ Phone number \_\_\_\_\_

Please give your written testimony: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### **APPLICANT'S CERTIFICATION AND AGREEMENT**

I certify that the facts set forth in this volunteer application are true and complete to the best of my knowledge, and I authorize the pregnancy center to verify their accuracy and to obtain reference information concerning my character and capabilities. I release CHOICES Women's Resource Center and any person or entity providing such reference information from any and all liability relating to the provision of such information or relating to any decisions made based upon such information. If I become a volunteer at CHOICES Women's Resource Center, I agree to fully adhere to its policies and rules, including those rules relating to maintaining client confidentiality. I recognize that, as a volunteer, I will serve in a different role than the employees of CHOICES, and I am not seeking, nor expecting to receive, any compensation or other benefits in return for any volunteer services which I may provide for this ministry.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_